

OFFICER'S BATTERY REPORT
CHICAGO POLICE DEPARTMENT

RD NO. **HZ510861**

INSTRUCTIONS: This form is to be completed for all incidents when: (1) a sworn member is the victim of a murder, aggravated battery, battery, aggravated assault, or assault while performing a police function either on-duty or off-duty. (2) a detention aide is the victim of a murder, aggravated battery, battery, aggravated assault, or assault while in the performance of his or her duties.

"X APPLICABLE BOXES"

| OFFICER INFORMATION | | INCIDENT INFORMATION | | |
|--|-----------------------------------|---|-----------------------------------|------------------------------|
| NAME (LAST - FIRST - M.I.) ARCHELETA, RAYMOND L | | <input checked="" type="checkbox"/> 1. INDOOR <input type="checkbox"/> 2. OUTDOOR ADDRESS OF OCCURRENCE 1333 N CLEVELAND AVE | | |
| STAR NO. 19887 | POSITION POLICE OFFICER | CITY CHICAGO | STATE (if outside Chicago) | |
| DATE OF APPOINTMENT 01-MAY-2013 | EMPLOYEE NO. [REDACTED] | LOCATION CODE 289-RESIDENCE PORCH/HALLWAY | BEAT OF OCCURRENCE 1821 | |
| UNIT OF ASSIGNMENT 018 | BEAT/CALL NO. 1821R | DATE OF OCCURRENCE 11-NOV-2016 | TIME 04:55:00 | DAY OF WEEK FRIDAY |
| SEX <input checked="" type="checkbox"/> 1. M <input type="checkbox"/> 2. F | RACE WHITE HISPANIC | NO. OF OFFICERS BATTERED 3 | | |
| HEIGHT 507 | WEIGHT 170 | WERE THERE ASSISTING UNITS ON SCENE? 1. <input checked="" type="checkbox"/> YES 2. <input type="checkbox"/> NO IF YES HOW MANY ASSISTING OFFICERS WERE PRESENT AT TIME BATTERY (EXCLUDING YOU OR YOUR PARTNERS)? 18 | | |
| TYPE OF ASSIGNMENT WHEN BATTERY OCCURRED | | | | |
| <input checked="" type="checkbox"/> 1. ON DUTY <input checked="" type="checkbox"/> A. UNIFORM, PATROL DUTY <input type="checkbox"/> B. UNIFORM, OTHER DUTY Describe _____ <input type="checkbox"/> C. CITIZEN'S DRESS <input type="checkbox"/> D. TACTICAL <input type="checkbox"/> E. B.I.S. UNIT <input type="checkbox"/> F. SPECIAL EMPLOYMENT <input type="checkbox"/> G. OTHER _____ | | WORKING: <input type="checkbox"/> A. ALONE <input checked="" type="checkbox"/> B. WITH ONE PARTNER <input type="checkbox"/> C. WITH MULTIPLE PARTNERS How many? PATROL TYPE: <input checked="" type="checkbox"/> A. SQUAD CAR <input type="checkbox"/> B. FOOT <input type="checkbox"/> C. BICYCLE <input type="checkbox"/> D. APV/MOTORCYCLE <input type="checkbox"/> E. SQUADROL <input type="checkbox"/> F. OTHER _____ | | |
| <input type="checkbox"/> 2. OFF DUTY <input type="checkbox"/> 3. SPECIAL EMPLOYMENT <input type="checkbox"/> 4. SECONDARY / OTHER | | | | |
| MANNER OF ATTACK | | | | |
| <input type="checkbox"/> 01. SHOT <input type="checkbox"/> 02. SHOT AT <input type="checkbox"/> 03. STABBED/CUT (INCLUDING ACTUAL ATTEMPT) <input checked="" type="checkbox"/> 04. STRUCK/BLUNT FORCE (INCLUDING ACTUAL ATTEMPT) <input type="checkbox"/> 05. OTHER (INCLUDING VERBAL THREATS) | | | | |
| TYPE OF WEAPON/THREAT | | | | |
| (Check all that apply): <input type="checkbox"/> A. FIREARM CALIBER <input type="checkbox"/> B. VEHICLE <input type="checkbox"/> C. KNIFE/OTHER CUTTING INSTRUMENT <input type="checkbox"/> D. BLUNT INSTRUMENT 1. REVOLVER 2. SEMI-AUTOMATIC 3. RIFLE 4. SHOTGUN <input type="checkbox"/> E. FEET <input type="checkbox"/> F. MOUTH (SPIT, BITE, ETC.) <input type="checkbox"/> G. VERBAL THREAT (ASSAULT) <input type="checkbox"/> H. OTHER (SPECIFY) _____ | | | | |
| TYPE OF ACTIVITY | | | | |
| <input checked="" type="checkbox"/> A. AMBUSH - NO WARNING <input type="checkbox"/> B. TRAFFIC STOP/PURSUIT <input type="checkbox"/> C. INVESTIGATING SUSPICIOUS PERSON <input checked="" type="checkbox"/> D. DISTURBANCE - DOMESTIC <input type="checkbox"/> E. DISTURBANCE - MENTAL PATIENT <input type="checkbox"/> F. DISTURBANCE - RIOT/MOB ACTION/CIVIL DISORDER <input checked="" type="checkbox"/> G. DISTURBANCE - OTHER <input type="checkbox"/> H. MAN WITH A GUN <input type="checkbox"/> I. PURSUING/ARRESTING OFFENDER (Specify) CHARGE _____ IUCR CODE _____ | | | | |
| <input type="checkbox"/> J. PROCESSING/TRANSPORTING/GUARDING A PRISONER (Specify) ORIGINAL CHARGE _____ ORIGINAL IUCR CODE _____ | | | | |
| <input type="checkbox"/> K. OTHER _____ | | | | |
| FIREARM USE INFORMATION | | | | |
| (Check all that apply): <input type="checkbox"/> A. OFFICER AT GUNPOINT <input type="checkbox"/> B. OFFICER'S OWN WEAPON OBTAINED <input type="checkbox"/> C. ATTEMPTED TO OBTAIN OFFICER'S OWN WEAPON | | | | |
| OFFENDER INFORMATION | | | | |
| SEX <input checked="" type="checkbox"/> 1. M | RACE BLACK | DOB 23-NOV-1963 | | |
| CB NO. 19396499 | IR NO. _____ | | | |
| TYPE OF INJURY TO OFFICER | | | | |
| <input type="checkbox"/> A. FATAL <input type="checkbox"/> B. NON-FATAL - MAJOR INJURY (Broken Bones/Serious Lacerations/Internal Injuries) <input checked="" type="checkbox"/> C. NON-FATAL - MINOR INJURY (Bruises/Swelling/Minor Abrasions) <input type="checkbox"/> D. NONE APPARENT/NONE | | | | |
| WAS THE OFFENDER'S ACTIVITY DRUG RELATED? <input type="checkbox"/> 1. YES <input type="checkbox"/> 2. NO <input checked="" type="checkbox"/> 3. UNKNOWN | | | | |
| GANG RELATED? <input type="checkbox"/> 1. YES <input type="checkbox"/> 2. NO <input checked="" type="checkbox"/> 3. UNKNOWN | | | | |
| NO. OF OFFENDERS PRESENT? 1 | | | | |
| LIGHTING CONDITIONS AT INCIDENT | | | | |
| <input type="checkbox"/> A. DAYLIGHT <input type="checkbox"/> D. DUSK <input type="checkbox"/> B. NIGHT <input checked="" type="checkbox"/> E. ARTIFICIAL LIGHT <input type="checkbox"/> C. DAWN <input checked="" type="checkbox"/> Z. GOOD | | <input checked="" type="checkbox"/> A. CLEAR <input type="checkbox"/> B. RAIN <input type="checkbox"/> C. SNOW <input type="checkbox"/> D. FOG/SMOKE/HAZE <input type="checkbox"/> E. SLEEP/WAKE <input type="checkbox"/> F. SEVERE CROSS WIND | | |
| APPROXIMATE OUTDOOR TEMPERATURE 50 °F | | | | |
| WEATHER CONDITIONS | | | | |
| LOG # 082962 ATTACHMENT # 13 | | | | |

Unusual Circumstances Regarding Officer Control Tactics and Safety: (If you need more space use additional sheets).

LOG # 1082952
Attachment # L3

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|---|--------------------------|--|
| REPORTING MEMBER - SIGNATURE ARCHULETA, RAYMOND L | STAR NO. 19887 | WATCH COMMANDER /UNIT COMMANDING OFFICER- SIGNATURE STAR NO. SCHMEER, PAULA C' |
| CPD-11.451 (REV. 1/04) | | 225 |